EXHIBIT C

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Martin Schneider, et al. v. Chipotle Mexican Grill, Inc., Case No. 4:16-cv-02200, U.S.D.C., N.D. Cal.

SETTLEMENT CLAIM FORM

If you purchased beverages or food products containing meat and/or dairy ingredients in a Chipotle restaurant from April 27, 2015 through June 30, 2016, you must complete this Claim Form to be eligible for compensation under the Settlement. Your Claim Form must be submitted (and if mailed, postmarked) on or before [date]. Proof of purchase, if any, must be submitted concurrently with this form.

Your Information

Your name:			
Address:			
City:	State: _		Zip Code:
Contact telephone number:]	Email:	
State the combined number of purchases of beveryou made in a Chipotle restaurant from April 2			
Only 5 valid Claims will be honored per Settlement honored per Settlement Class Member with proof of Household.			
• Number of Purchases <i>Without</i> Proof:			
Number of Purchases With Proof:			
Valid proof of purchase <i>must</i> be attached to this Cl of purchase includes the following: • receipt(s) • a copy of the purchase on your credit/del • other document that you believe evidence	oit card sta	atement	ensation for purchases with proof. Valid proof
Please select the manner in which payment will	be issued	for your valid C	laims.
PayPal Paper Check via mail			
If you select payment via PayPal, the email address PayPal account liked to that email address. If you using the email address entered at the top of this fo	do not hav	ve a PayPal accou	nt, you will be prompted to open an account
Sign and Date the Affirmation below:			
 I hereby affirm, under penalty of perjury under the I personally purchased one or more bevera restaurant from April 27, 2015 through Jur. I understand that by not opting out of the S described in the Settlement Agreement. The information provided in this Claim Fo 	ges or foo le 30, 201 ettlement	od products contai 6. ., I have given a co	ning meat and/or dairy ingredients in a Chipotle omplete Release of all Released Claims as
Signature		Date	